

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 548 OF 4651	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Democratic Senatorial Campaign Committee

A. Robert C Ladner Full Name (Last, First, Middle Initial) Mailing Address 3827 Green Valley Rd City ljamsville State MD Zip Code 21754-9108 FEC ID number of contributing federal political committee. C Name of Employer Dyax Corporation Occupation Scientist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 559.44		Date of Receipt 12 / 20 / 2013 Transaction ID : VN874A6DVD8 Amount of Each Receipt this Period 10.00
B. Eric Lager M. D. Full Name (Last, First, Middle Initial) Mailing Address 2400 Chestnut St Apt 3302 City Philadelphia State PA Zip Code 19103-4326 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation Psychiatrist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt 12 / 31 / 2013 Transaction ID : VN874A61RX4 Amount of Each Receipt this Period 150.00
C. William Lai Full Name (Last, First, Middle Initial) Mailing Address 465 W Portola Ave City Los Altos State CA Zip Code 94022-1125 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt 12 / 26 / 2013 Transaction ID : VN874A5XHT4 Amount of Each Receipt this Period 200.00
SUBTOTAL of Receipts This Page (optional).....		360.00
TOTAL This Period (last page this line number only).....		

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